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APPLICANTS

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**** CONTINUING DATA *******

This appln claims benefit of 60/206,356 05/23/2000 and is a CIP of 09/783,481 02/14/2001 PAT 6,637,882
 which is a CIP of 09/444,161 11/22/1999 PAT 6,409,341
 which is a CIP of 09/198,545 11/24/1998 PAT 6,065,837 *BNT*

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED****** 07/18/2001**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 15	TOTAL CLAIMS 53 160	INDEPENDENT CLAIMS 56
35 USC 119 (a-d) condition met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>Frank Thomas BNT</i> Examiner's Signature Initials				

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TITLE

EYE VIEWING DEVICE COMPRISING EYEPIECE AND VIDEO CAPTURE OPTICS

FILING FEE RECEIVED 4336	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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